SUBMIT: COMPLETED APPLICATION, TAX STATEMENT AND FEE TO: Bayfield County
Planning and Zoning Depart.
PO Box 58
Washburn, WI 54891
(715) 373-6138

APPLICATION FOR PERMIT

Date Start Decreases AUG 222014 AUG 222014 CHICAGO

Date: Permit #: Refund: Amount Paid: 9-24-14 0

INSTRUCTIONS: No permits will be issued until all fees are paid. Checks are made payable to: Bayfield County Zoning Department. DO NOT START CONSTRUCTION HATH ALL AREA.

Bayfield Co. Zoning Dept.

	7 7 2 2	Rec'd for Issuance	NACONAL PROPERTY AND ASSESSMENT OF THE PROPERTY OF THE PROPERT	Municipal Use				Commercial Use				Residential Use			Proposed Use	Proposed Construction:	Existing Structure: (If permit being applied for is relevant to it)							Value at Time of Completion * include donated time & material	□ Non-Shoreland		X Shoreland →		Section <u>13</u>	1/4,	PROJECT LOCATION	en t			Owner's Name:	O NOT START CONSTRUCTION UNTIL ALL PERMITS HAVE BEEN ISSUED TO APPLICANT TYPE OF PERMIT REQUESTED—> LAND USE SANITARY
	l I.,	ance						Se				ю			J (ion:	if permit bein	X EXISTING	Property	Run a Business on	Rejocate (existing bldg)	Addition/Alteration	☐ New Construction	Project			(Is Property/	☐ Is Property/Land within 300 feet of I Creek or Landward side of Floodplain?	, Township	1/4	Legal Description:	(Person Signing Application on behalf of Owner(s))	S S		larogaret,	JESTED-
Other: (explain)	Special Us Condition		Accessory	Accessory Building	Addition/	Mobile Ho	Bunkhous						ng.co	Residence	Drincinal S		g applied for			less on	isting bldg)	Iteration	ruction	t			Land within	Land within ward side of	43 _N	Gov't Lot		tion on behalf o	2		+ M C.	ERMITS HAVE BEEN
plain)	Special Use: (explain) 4.55 M Conditional Use: (explain)		Building Addition	Building (specify)	Addition/Alteration (specify)	Mobile Home (manufactured date)	e w/ (□ sanitary,	with Attached Garage	with (2 nd) Deck	with a Deck	with (2 nd) Porch	with a Porch	with Loft	(i.e. cabin, hunting shack, etc.)	tructure /first s		is relevant to it)		☐ Foundation	□ No Basement	☐ Basement	☐ 1-Story + Lott		# of Stories and/or basement	-		Is Property/Land within 1000 feet of Lake, Pond or Flowage	☐ Is Property/Land within 300 feet of River, Stream Creek or Landward side of Floodplain?	N, Range 6	ot Lot(s)	(Use Tax Statement) P		7100			USE SANITARY
		1	Accessory Building Addition/Alteration (specify)	ify)	eify)	d date)	Bunkhouse w/ (☐ sanitary, or ☐ sleeping quarters, or	Garage	X		5			ing shack, etc.)	Proposed Structure Proposed Structure Proposed Structure	Length:	Length:			4		t 🖎 Year Round	,	nt Use		If yescontinue -	Pond or Flowage	Stream (incl. Intermittent) If yescontinue —	w Town of:	CSM Vol & Page	PIN: (23 digits) 04-034-2-43-06-73-200-		ctor Phone:	City/State/Zip:	ddress:	□ PRIVY
	Ovar Cland Oran vid		/)				, <u>or</u> □ cooking & food								re					□ None		3					Distance Stru	Distance Stru	Vamaka Gor	Lot(s) No.	6-13-200	Agent Mailing Ad	Plumber:	I 54821		☐ CONDITIONAL USE
White a		30	The state of the s				k food prep facilities)									Width:	Width:	□ None	□ Compost Toilet	☐ Portable (w/service contract)	☐ Privy (Pit)	Sanitary (Exists) Specify Type:		Sew		/5+fee	cture_is from Sho	Distance Structure is from Shoreline :		Block(s) No.	325-330	Agent Mailing Address (include City/State/Zip):		٧	S :	×
			 		1	[es)												oilet	//servi	or	xists)	ł	Wha /er/Sa /on th		Te e	reline	reline	Lot Size	Subd		State/Z			E 5	SPECIAL USE
-	7						(_ □					ce con	Vaul	Specif	5	What Type of er/Sanitary Sys on the propert		feet		*	ize	Subdivision:	rded D	ip):			1,0	
×			×	×	×	×	×	×	×	×	×	×	×	×	Dimensions X		<u></u>			tract)	ted (m	ify Type:	H	What Type of Sewer/Sanitary System is on the property?			¥	Is Pro	4	Unakeyon	06 ocume				-	□ в.о.а.
	20	•	_	_)))	-		L	_		_		ons)	Height:	Height:			-	ited (min 200 gallon)	C077U		3		□ No	Yes	Is Property in Floodplain Zone?	Acreage	~	nt: (i.e. Prop	Written Authoria Attached Ves No	Plumber Phone:	cen raone.	Telephone: 704-261	Α
	200 -			A Property of the Property of				-	Hardy Comments of the Comments					ne freshoute	Square Footage							□ \well	_ City	Water		No No	□Yes	Are Wetlands Present?	O Se	Lalushore	Recorded Document: (i.e. Property Ownership) Nolume 1067 Page(s) 345	Written Authorization Attached Yes KNo	Phone:	্ন	elephone: 104-2619	THER

Date

2014

I (we) declare that this application (including any am (are) responsible for the detail and accuracy of may be a result of Bayfield County relying on the above described propagy at any reasonable time.

FAILURE TO OBTAIN A PERMIT or STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES my accompanying information) has been examined by me (us) and to the best of my (our) knowledge and belief it is true, correct and complete. I (we) arknowledge that I (we) try of all information I (we) am (are) providing and that it will be relied upon by Bayfield County in determining whether to issue a permit. I (we) further accept liability which this information I (we) am (are) providing in or with this application. I (we) consent to county officials charged with administering county ordinances to have access to the

Secretarial Stail

Authorized Agent:

(If you are signing on behalf of the owner(s) a letter of authorization must accompany this application)

or letter(s) of authorization must accompany this application)

Owner(s): 😾 (If there are Multip

Address to send permit

SQMC

95

QUOVE

y dweys)

Show Location of (*):

Show:

Show:

(2) (3) (4) (5) (6) Show any (*): Show any (*):

Proposed Construction

North (N) on Plot Plan

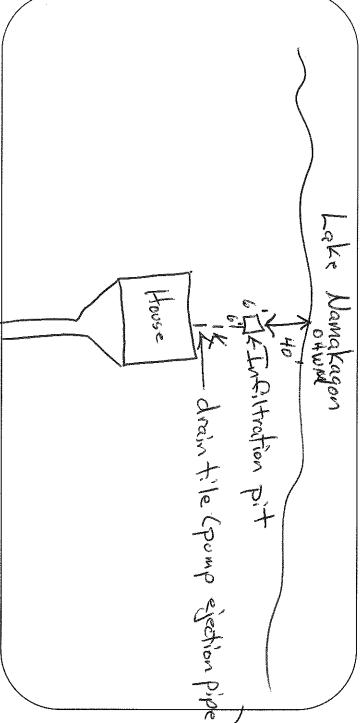
(*) Driveway and (*) Frontage Road (Name Frontage Road)

All Existing Structures on your Property

(*) Well (W); (*) Septic Tank (ST); (*) Drain Field (DF); (*) Holding Tank (HT) and/or (*) Privy (P)

(*) Lake; (*) River; (*) Stream/Creek; or (*) Pond

(*) Wetlands; or (*) Slopes over 20%



Please complete (1) - (7) above (prior to continuing)

8 Setbacks: (measured to the closest point)

Changes in plans must be approved by the Planning & Zoning Dept.

		Feet	Setback to Privy (Portable, Composting)
		Feet	Setback to Drain Field
Feet	Setback to Well	Feet	Setback to Septic Tank or Holding Tank
Feet	Elevation of Floodplain	Feet	Setback from the East Lot Line
☐ Yes ☐ No	20% Slope Area on property	Feet	Setback from the West Lot Line
Feet	Setback from Wetland	Feet	Setback from the South Lot Line
		Feet	Setback from the North Lot Line
Feet	Setback from the Bank or Bluff		
Feet	Setback from the River, Stream, Creek	Feet	Setback from the Established Right-of-Way
Feet	Setback from the Lake (ordinary high-water mark)	Feet	Setback from the Centerline of Platted Road
Measurement	Description	Measurement	Description

Prior to the placement or construction of a structure within ten (10) feet of the minimum required setback, the bou other previously surveyed corner or marked by a licensed surveyor at the owner's expense.

Prior to the placement or construction of a structure more than ten (10) feet but less than thirty (30) feet from the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the criter previously surveyed corner, or verifiable by the Department by use of a corrected compass from a known corner within 500 feet of the proposed site of the structure, or must be marked by a licensed surveyor at the owner's expense.

dary line from which the setback it

must be visible from

Stake or Mark Proposed Location(s) of New Construction, Septic Tank (ST), Drain field (DF), Holding Tank (HT), Privy (P), and Well (W),

NOTICE: All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun. For The Construction Of New One & Two Family Dwelling: ALL Municipalities Are Required To Enforce The Uniform Dwelling Code
The local Town, Village, City, State or Federal agencies may also require permits.

Issuance Information (County Use Only)	y) Sanitary Number:		# of bedrooms:	Sanitary Date:	
Permit Denied (Date):	Reason for Denial				
Permit #: 14-0355	Permit Date: - G	9.24-14			
Ship Ct	us Lot(s))	□ No Mitigation Required □ Yes Ye No Mitigation Attached □ Yes	XN0 NN0	Affidavit Required Affidavit Attached	□Yes X/No □Yes X/No
Granted by Variance (B.O.A.)		Previously Granted by Variance (B.O.A. ☐ Yes 😕 No	· Variance (B.O.A.) Case #:		
Was Parcel Legally Created 3€ Yes □ No Was Proposed Building Site Delineated □ Yes □ No	XI yes No /U/	Were Property Line	Were Property Lines Represented by Owner Was Property Surveyed	∭	□ No
Inspection Record:				Zoning District / Lakes Classification ((-1)
Date of Inspection: $9-19-14$	Inspected by:	Mitudal		Date of Re-Inspection:	
Condition(s):Town, Committee or Board Conditions Attached? I Yes I No-(If No they need to be attached.) IMM WAT USE ROST MEMBERS ENT PLACEMENT TO DELICATE	nns Attached? Tyes IN	"O-(IF No they need to be attack to pull")	Mt usin	n on silfation	the services
of the lake Must cust an in fultration pit of the end of the	rest an in fa	Stration pit a	a stump a	nemoved.	in call
Signature of Inspector:	Julas !			Date of Approval;	
Hold For Sanitary:	Hold Fo	Hold For Affidavit:	Hold for Face:		

SUBMIT: COMPLETED APPLICATION, TAX STATEMENT AND FEE TO: Bayfield County
Plaming and Zoning Depart.
PO Box 58
Washburn, WI 54891
(715) 373-6138

K E

BAYFIELD COUNTY, WISCONSIN

Date Stand (Received)

Date 24 2014

JUL 24 2014

Permit #: Refund: Date: Amount Paid: \$1500 6, 5, 5, 0

Bayfield Co. Zoning Dept.

INSTRUCTIONS: No permits will be issued until all fees are paid. Checks are made payable to: Bayfield County Zoning Department. DO NOT START CONSTRUCTION UNTIL ALL PERMITS HAVE BEEN IS

			I	, 	- Iviunicipal ose				☐ Commercial Use			nesidential Ose		Ţ 		Proposed Use	Proposed Construction:	Existing Structure : (if permit being applied for is relevant to it)		Property	□ Reio	20,00	T-1	XNew	Value at Time of Completion * include donated time & material	□ Non-Shoreland		X Snoreland —► X Is Pr	ه م		۵	1/4,	PROJECT Legal D	Ageill, yreison	Contractor:	OO Ring	Meil & Diana
	ļ							□ •	2	1	1	1		8		`		nit being	The state of the s	erty	Run a Business on	Conversion	☐ Addition/Alteration	New Construction	Project			operty/L	or Landw	, Township _		1/4	Legal Description:	oigning Apparation	Bai	2	70
Other: (explain)	Conditional Use: (explain)	Special Use: (explain)		Accessory Building Addition/Alteration	Accessory Building	Addition/Alteration	Mobile Home (manufactured date)	Bunkhouse w/ (□ sanitary,						Residence (i.e. cabin, hunting shack, etc.)	Principal Structure			applied fo			ting bldg)		eration	uction				X Is Property/Land within 1000 feet of Lake,	Is Property/Land within 300 feet of River, Stream (incl. Intermittent) Creek or Landward side of Floodplain? If yes—continue —		ر>	Gov't Lot		9	ro	1	Deur
(plain)	nal Use: (e	se: (explai	**************************************	/ Building	/ Building	'Alteratio	ome (mar	se w/ (□ s	with A	with (2	with a Deck	with (2 nd) Po	with Loft	e (i.e. cab	Structure			r is relevan		□ Four	□ No B	₹ 2-Story	□ 1-Sto		# of and/or			1000 feet	300 feet	N, Range	i lassa	Lot	(Use Tax Statement)	bellall of Owner(s)	Inc	م	You
	xplain)	n)		Addition	(specify)	n (specify)	nufactured	anitary, or	with Attached Garage	with (2 nd) Deck	Deck	with (2 nd) Porch	; sfæ -	in, huntin				# (5)		Foundation	No Basement	ory	1-Story + Loft	уу	# of Stories and/or basement		**	t of Lake, P	of River, SI	c	ر ا	Lot(s)					9-9
		٠		/Alterat	(Y)	y)	date)	r 🗆 sleep	arage					g shack,	ucture o	Propo	Length:	Length:					B		.		# 900 COHERE	Pond or Flowage	Stream (inc		_	906 MS	04-034-2-5	Again and a	715 558-118		904 M
				ion (specify)				sleeping quarters,			***************************************			etc.)	(first structure on property)	Proposed Structure	th: 76	#					Year Round	Seasonal	Use		1001000	owage	(incl. Intermittent)	Na	Town of:	Vol & Page	43-06-09-3		10ne:		Bari
	William Martin Walter			ify)				약 □							y)	ture	5'-9"								beá			Dista	ļ ·	Namaki	-	8		000	Plumber:	!	la ct
								cooking &													None				# of bedrooms			Distance Structure	Distance Structure	Kagon		Lot(s) No.	05-005-	E DESCRIPTION OF THE PROPERTY			9
1								food prep facilities)									Width:	Width:	□ None		☐ Privy (Pit)		(New	J Mun					11		-	Block(s) No.	5-2000	i coo fincion	Living Water Plumbin		On thes
								facilities)			***************************************						40'		10	Compost Toilet	able (w/se	ary (Exis	(New) Sanitary	Municipal/City	V Sewei			is from Shoreline :	is from Shoreline :						Par		TX
_		-			_		_		2 C J	2		- - - - - - -		(64)		D	04			et	Portable (w/service cont	. 3			What Typ: wer/Sanitan Is on the pro			ine:	ine :		Lot Size	Subdivision:	Volume	7,19	2017		125
×	×	×		×	×	×	×	×	×	×	-	× >	<	~?;)	×	Dimensions	He	#			ntract)	ify Type:	fy Type: £		What Type of Sewer/Sanitary System Is on the property?			□ X Ves	Is Property in Floodplain Zone?			n:	94)	4			201
-	_	_		_	_	J	-	1	7)	6 T	_		_	0		าร	1	Height:			tract)		Specify Type: Holding lank	<u> </u>	n	0 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		□ No	erty in in Zone?	1.7	Acreage		Page	Attached	NUT 634	7	Cell Phone:
			***************************************						5/2	200	2,3	6		3400 Dalo		Square Footage	27:04								*	100		□ № Yes	Are Wetlands Present?		že		Page(s) 895	ed ₹ No	715-634-8057	215-1650	ņ
										Arrest Control of Street		-3		か な		re ge	1						Well	City	Water			ė es	tlands int?				la diameter		057	023)	

APPLICANT - PLEASE COMPLETE PLOT PLAN ON REVERSE SIDE

Owner(s): (If there are Multiple

Mowners must sign

fter(s) of

this application)

Date

Authorized Agent:

Address to send permit _

Rondy

M

42630

US

Hwy

63

behalf of the

owner(s) a letter of authorization must accompany

application)

Collection of the second of th

Date

Attach
Copy of Tax Statement V
rased the property send your Recorded Deed

ロの Setback from the North Lot Line
Setback from the South Lot Line
Setback from the West Lot Line
Setback from the East Lot Line Permit #: Setback to **Drain Field**Setback to **Privy** (Portable, Composting)
Prior to the placement or construction of a structure within ten (10) feet of the mother previously surveyed corner or marked by a licensed surveyor at the owner's Hold For Sanitary: Inspection Record: Permit Denied (Date): Issuance Information (County Use Only) Setback from the Centerline of Platted Road Setback from the Established Right-of-Way Signature of Inspector: Condition(s):Town, Committee Date of Inspection: Setback to Septic Tank or Holding Tank Is Parcel a Sub-Standard Lot Is Parcel in Common Ownership Is Structure Non-Conforming Was Parcel Legally Created Was Proposed Building Site Delineated or to the placement or construction of a structure more than ten (10) feet but less than thirty (30) feet from the minimum required setback, the boundary line from which the setback must be measured must be visible from e previously surveyed corner to the other previously surveyed corner to the other previously surveyed corner, or verifiable by the Department by use of a corrected compass from a known corner within 500 feet of the proposed site of the structure, or must be arked by a licensed surveyor at the owner's expense. Please wethends Z d by Variance (B.O.A.) complete (1) - (7) above (prior to continuing) (1) (2) (3) (4) (5) (7) (9) Stake or Mark Proposed Location(s) of New Construction, Septic Tank (ST), Drain field (DF), Holding Tank (HT), Privy (P), and Well (W). Stable Show any (*): Show any (*): Show: Show: Show Location of: Show / Indicate: Setbacks: (measured to the closest point) Show Location of (*): NOTICE: All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun. For The Construction Of New One & Two Family Dwelling: ALL Municipalities Are Required To Enforce The Uniform Dwelling Code
The local Town, Village, City, State or Federal agencies may also require permits. Description Draw or Sketch your Property (regardless of what you are applying for) 8-14-14 or Board Conditions Attached? Case #: ر د د ∆X Yes □ Yes Hold For TBA: Meets ake ¥ Yes (Deed of Record) _____(Fused/Contiguous Lot(s)) Que (*) Driveway and (*) Frontage Road (Name Frontage Road)
All Existing Structures on your Property
(*) Well (W); (*) Septic Tank (ST); (*) Drain Field (DF); (*) Holding Tank (HT) and/or (*) Privy (P)
(*) Lake; (*) River; (*) Stream/Creek; or (*) Pond
(*) Wetlands; or (*) Slopes over 20% Proposed Construction North (N) on Plot Plan □ No Apposed <u>بر</u> = Lake ×,× he minimum requin Sanitary Number: 14-575 Inspected by: /// Permit Date: Measurement 6 400 8 ☐ Yes ☐ No - (If No they need 125 Sted ò Pomoved Proche Nama Kugon Of W Hold For Affidavit: Remove Structure Structure Feet Feet Feet Feet Feet Feet Mitigation Required Mitigation Attached Previously Granted by Variance (B.O.A.) Setback from Wetland
20% Slope Area on property
Elevation of Floodplain Setback from the River, Stream, Creek
Setback from the Bank or Bluff Were Property Lines Represented by Owner
Was Property Surveyed Setback to Well Setback from the Lake (ordinary high-water mark) dary line from which the setback must be measured must be visible from *well Attached Garaje À be attached.) Changes in plans must be approved by the Planning & Zoning Dept. # of bedrooms: Hold For Fees: □ Yes Description Case #: Property Affidavit Required Affidavit Attached Cinc. X Yes Sanitary Date: 7 Zoning District Lakes Classification Date of Re-Inspection: X. Date cotypopropes: 14 one previously surveyed corner to the _ Yes Measurement 1397 □ Yes 31-14 2 N N N N 0 Feet Feet 100 A Feet Feet Fee

PUD